

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	mbo	9521	4/23/01
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

✓	.....	Rejected	N	.....	Non-elected
=	.....	Allowed	I	.....	Interference
-	(Through numeral)...	Canceled	A	.....	Appeal
÷	.....	Restricted	O	.....	Objected

Claim	Date
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Claim	Date
Final	
Original	
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Claim	Date
Final Original	2/2
101 ✓	
102 ✓	
103 ✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here